

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 496879

FILED
Apr 27, 2009
Secretary of State

Entity Name: THERMOPLASTIC SOLUTIONS, INCORPORATED

Current Principal Place of Business:

1251 SEEDS AVENUE
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

1251 SEEDS AVENUE
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 59-1644555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANNON, DONNA P.
1251 SEEDS AVE.
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

SHANNON, DONNA P.
1251 SEEDS AVE.
SARASOTA, FL 34237 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DONNA P SHANNON

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHANNON, DONNA P.
Address: 1251 SEEDS AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: PICKETT, WANDA
Address: 1251 SEEDS AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: T () Delete
Name: WASDIN, RANDALL
Address: 1251 SEEDS AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: PICKETT, JOHN
Address: 1251 SEEDS AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: V () Delete
Name: GOODELL, WILLIAM
Address: 1251 SEEDS AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: V () Delete
Name: SNODGRASS, KEITH
Address: 1251 SEEDS AVENUE
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PICKETT, LINDA
Address: 1251 SEEDS AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA P SHANNON

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date